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| Issue Classification  | Application/Control No. 10580009 | Applicant(s)/Patent Under Reexamination RETOLAZA ET AL. |
| | Examiner MOHAMMAD M ALI | Art Unit 3744 |

| ORIGINAL | | | | | | INTERNATIONAL CLASSIFICATION | | | | | | | | | | | | |
|--------------------|-----------------------------------|----------|--|--|--|------------------------------|---|---|---|----------------------|-------------|--|--|--|--|--|--|--|
| CLASS | | SUBCLASS | | | | CLAIMED | | | | | NON-CLAIMED | | | | | | | |
| 62 | | 476 | | | | F | 2 | 5 | B | 15 / 00 (2006.01.01) | | | | | | | | |
| CROSS REFERENCE(S) | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | |
| CLASS | SUBCLASS (ONE SUBCLASS PER BLOCK) | | | | | | | | | | | | | | | | | |
| 62 | 481 | 499 | | | | | | | | | | | | | | | | |
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| <input type="checkbox"/> Claims renumbered in the same order as presented by applicant <input type="checkbox"/> CPA <input type="checkbox"/> T.D. <input type="checkbox"/> R.1.47 | | | | | | | | | | | | | | | |
|---|----------|-------|----------|-------|----------|-------|----------|-------|----------|-------|----------|-------|----------|-------|----------|
| Final | Original | Final | Original | Final | Original | Final | Original | Final | Original | Final | Original | Final | Original | Final | Original |
| 1 | 1 | 17 | 17 | | | | | | | | | | | | |
| 2 | 2 | 18 | 18 | | | | | | | | | | | | |
| 3 | 3 | 19 | 19 | | | | | | | | | | | | |
| 4 | 4 | | | | | | | | | | | | | | |
| 5 | 5 | | | | | | | | | | | | | | |
| 6 | 6 | | | | | | | | | | | | | | |
| 7 | 7 | | | | | | | | | | | | | | |
| 8 | 8 | | | | | | | | | | | | | | |
| 9 | 9 | | | | | | | | | | | | | | |
| 10 | 10 | | | | | | | | | | | | | | |
| 11 | 11 | | | | | | | | | | | | | | |
| 12 | 12 | | | | | | | | | | | | | | |
| 13 | 13 | | | | | | | | | | | | | | |
| 14 | 14 | | | | | | | | | | | | | | |
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| NONE | | Total Claims Allowed: 19 | |
| (Assistant Examiner) | (Date) | | |
| /MOHAMMAD M ALI/ Primary Examiner.Art Unit 3744 | 07/26/10 | O.G. Print Claim(s) | O.G. Print Figure |
| (Primary Examiner) | (Date) | 1 | 1 |